

GROUP TRAINING ATTENDANCE & REPORTING FORM

(Revised 10/15/2015)

FOR	COMPUTER	USE	ONLY

Date Entered:

Event Number:

Type of Training (Circle One)	M-Mandatory N-N	on-mandatory			
Name of Training					
Date(s) of Training					
Location					
Instructor					
Length of Training (hours)					
Name (Please Print)				Test	
First Last	Signature	Facility/ Program	EIN#	Score	
1					
2					
3					
4					
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30					
Approving Signature:		Facility/Program	Facility/Program		